

APPLICATION DATA SHEET

APPLICATION INFORMATION

Application Date:: 08/19/03
Application Type:: REGULAR
Subject Matter:: UTILITY
CD-ROM or CD-R?:: NONE
Title:: COMPOSITIONS AND METHODS FOR
ATTORNEY DOCKET NUMBER:: THE DIAGNOSIS AND TREATMENT OF
P5026R1
TUMOR

INVENTOR INFORMATION

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	BE
Status::	FULL CAPACITY
Given Name::	Frederic
Middle Name::	J.
Family Name::	DeSauvage
City of Residence::	Foster City
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	187 Shooting Star Isle
City of Mailing Address::	Foster City
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94404
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	US
Status::	FULL CAPACITY
Given Name::	Gretchen
Family Name::	Frantz
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	135 San Benito Way
City of Mailing Address::	San Francisco
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94127

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	GB
Status::	FULL CAPACITY
Given Name::	Kenneth
Middle Name::	J.
Family Name::	Hillan
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	64 Seward Street
City of Mailing Address::	San Francisco
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94114
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	US
Status::	FULL CAPACITY
Given Name::	Paul
Family Name::	Polakis
City of Residence::	Burlingame
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	1449 Cortez Avenue
City of Mailing Address::	Burlingame
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94010

Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	US
Status::	FULL CAPACITY
Given Name::	Andrew
Family Name::	Polson
City of Residence::	San Francisco
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	1850 Turk St. #102
City of Mailing Address::	San Francisco
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94115
Applicant Authority Type::	INVENTOR
Primary Citizenship Country::	AU
Status::	FULL CAPACITY
Given Name::	Victoria
Family Name::	Smith
City of Residence::	Burlingame
State or Province of Residence::	CA
Country of Residence::	US
Street of Mailing Address::	19 Dwight Road
City of Mailing Address::	Burlingame
State or Province of Mailing Address::	CA
Country of Mailing Address::	US
Postal or Zip Code of Mailing Address::	94010

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: US
Status:: FULL CAPACITY
Given Name:: Susan
Middle Name:: D.
Family Name:: Spencer
City of Residence:: Tiburon
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 2395 Paradise Drive
City of Mailing Address:: Tiburon
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94920

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: US
Status:: FULL CAPACITY
Given Name:: Thomas
Middle Name:: D.
Family Name:: Wu
City of Residence:: San Francisco
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 41 Nevada Street
City of Mailing Address:: San Francisco
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94044

Applicant Authority Type:: INVENTOR
Primary Citizenship Country:: US
Status:: FULL CAPACITY
Given Name:: Zemin
Family Name:: Zhang
City of Residence:: Foster City
State or Province of Residence:: CA
Country of Residence:: US
Street of Mailing Address:: 876 Taurus Drive
City of Mailing Address:: Foster City
State or Province of Mailing Address:: CA
Country of Mailing Address:: US
Postal or Zip Code of Mailing Address:: 94404

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 09157

REPRESENTATIVE INFORMATION

Representative Customer Number:: 00000

DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Non-Provisional of	60/484959	07/02/03
This Application	Non-Provisional of	60/426847	11/15/02
This Application	Non-Provisional of	60/419008	10/15/02
This Application	Non-Provisional of	60/413192	09/23/02
This Application	Non-Provisional of	60/405645	08/21/02
This Application	Non-Provisional of	60/404809	08/19/02